PART B - FEE(S) TRANSMITTAL

FEB 1 4 2005 (Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Uso Block) for any change of safetime

27194

*RADEMARY

7590

11/16/2004

HOWREY SIMON ARNOLD & WHITE, LLP C/O M.P. DROSOS, DIRECTOR OF IP ADMINISTRATION 2941 FAIRVIEW PK BOX 7

FALLS CHURCH, VA 22042

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmirral is being deposited with the United
States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUE FEE address above, or being facismile
transmirred to the USPTO (703) 746-4000, on the date indicated below.

Gayle L. Jacob (Dépositor's aigne ale 4 02/14/05 (Даца)

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 07/17/2003 Mark Roland Boeder 10451.0039.NPUS01 1363

TITLE OF INVENTION: CHRYSANTHEMUM PLANT NAMED 'NIRVANA IMPROVED'

APPLN. TYPE	SMALL ENTITY	1\$SUE F.	PE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$1100		\$300	\$1400	02/16/2005
EXAN	INER	ART UN	ÚT .	CLASS-SUBCLASS	1	
PARA, ANNETTE H		1661		PLT-286000	J	
FR 1.363). Change of correspond Address form PTO/SB/1 Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND	tion (or "Fee Address" Indic or more recent) attached. Un RESIDENCE DATA TO 1	Correspondence anion form se of a Customer BE PRINTED ON T	(1) the na or agents (2) the na registered 2 registered listed, no THE PATEN		a member a 2 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	y Simon Arnold
recordation as set forth in (A) NAME OF ASSIGN				ear on the patent. If an assign for filing an assignment. E: (CTTY and STATE OR CO.)		
Cl						
Cleangro;		ories (will not be ori	Unite	ester, West Sussider 02 02 02 03 03 04 05 05 05 05 05 05 05	FC:1504 300.0	O DA
ease check the appropriate	assignce category or catego		Unite inted on the p	d Kingdom 02 atent): Individual 2000	FC:1504 300.0	O DA
ease check the appropriate	assignce category or catego	4b.	Unite inted on the p . Payment of	d Kingdom 02 atent): D Individual XXXX Fee(s):	C:1504 300.0 C:8003 mporation or other private of	O DA
ease check the appropriate The following fee(s) are The following fee(s) are	assignce entegory or eategory enclosed:	4b.	Unite inted on the p Payment of A check	d Kingdom 02 atent): Individual 100 Fec(s): in the amount of the fee(s) is en	C: 1504 300.0 C: 8003 prior other private gr	O DA
lease check the appropriate The following fee(s) are The Issue Fee Publication Fee (No s	assignce category or catego	4b.	Unite inted on the p . Payment of A check i	d Kingdom 02 atent): Individual 25 Fec(s): in the amount of the fec(s) is en by credit card. Form PTO-2038	C:1504 300.0 C:8003 30.0 Appraison or other private gr closed. is attached.	O DA O DA O DA Supentity Government
lease check the appropriate The following fee(s) are The following f	e assignce category or categor	4b. cd) opies)	Unite inted on the p Payment of A check i Payment The Dire Deposit Acc	d Kingdom 02 atent): Individual 100 Fec(s): in the amount of the fee(s) is en	C: 1504 300.0 C: 800.3 Approximation or other private of closed. is attached. large the required fee(s), or (chicles an extra contract of contract	O DA O DA O DA O DA COMPERTINY GOVERNMENT Credit any overpayment, to copy of this form).
lease check the appropriate a. The following fee(s) are the following f	e assignce entegory or category conclused: consideration of the control of the c	4b. 2001	Unite inted on the p Payment of A check i Payment Payment The Dire Deposit Acc	atent): Individual SC Fec(s): in the amount of the fec(s) is em by credit card. Form PTO-2038 ector is hereby authorized by chount Number 1263 ant is no longer claiming SMAI	C: 1504 300.0 C: 800.3 Approvation or other private of closed. is attached. large the required fee(s), or conclose an extra conclose a	O DA O DA O DA Coup Entity Government credit any overpayment, to copy of this form). FR 1.27(g)(2).
lease check the appropriate a. The following fee(s) are the following f	e assignce entegory or category conclused: consideration of the control of the c	4b. 2001	Unite inted on the p Payment of A check i Payment Payment The Dire Deposit Acc	atent): Individual 12 Control of the fee(s): In the amount of the fee(s) is emby credit card. Form PTO-2038 ettor is hereby authorized by chount Number 1263	C: 1504 300.0 C: 800.3 Approvation or other private of closed. is attached. large the required fee(s), or conclose an extra conclose a	O DA O DA O DA Coup Entity Government credit any overpayment, to copy of this form). FR 1.27(g)(2).

an application. Confidentiality is governed by 3 U.S.C. 122 and 3/CFR 1.14. It is collecting is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 11/04) Approved for use through 04/30/2007.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE





301 RAVENSWOOD AVENUE MENLO PARK, CA 94025-3434 PHONE: 650.463.8100 • FAX: 650.463.8400

FACSIMILE COVER SHEET

TO:	February 14, 200	BOX ISSUE FEE						
10.	COMPANY:	USPTO - Commission	ner for Patents					
	FAX NUMBER	(703) 746-4000						
FROM:	NAME:	Mark K. Dickson (Reg	. No. 32,889)					
	CONFIRMATION #:	Nirvana Improved	USER ID:	5152				
NUMBER OF PAGES, <u>INCLUDING</u> COVER:		2	CHARGE NUMBER:	10451,0039.NPUS01				
	AL WILL FOLLOW VIA:							
По	GULAR MAIL OVER	NIGHT DELIVERY HAND I	DELIVERY OTHER:					
_	AL WILL NOT FOLLOW			×				
— ⊠ origin/	AL WILL NOT FOLLOW NTAL MESSAGE:							
— ⊠ origin⁄				•				
— ⊠ origin⁄								
— ⊠ origin⁄								
— ORIGINA			·					

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS PRIVILEGED AND CONFIDENTIAL. IT IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HERBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

IF THERE ARE ANY QUESTIONS OR PROBLEMS WITH THE TRANSMISSION OF THIS FACSIMILE, PLEASE CALL 850.463.8103.